

091463174

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	25		02-16-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SLA		3-31-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 -+ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	3 5 2
Original	01 02 03
1	✓ ✓ ✓
2	1
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8	✓ ✓
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23	✓ ✓
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36	✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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